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Gerard J. McGowan, Jr. Carolyn Paden From: Ex. To: No. of Pages: 12 (including cover sheet) Group: 1761 571-273-8300 Fax No.: January 26, 2006 Date: Fabian et al.; F7571(V) RE: Attached please find: 1. Transmittal letter Amendment 2. 3. **Extension Request** for: Fabian et al. **Applicant:** 10/005,702 Serial No.: December 5, 2001 Filed: 1761 Group: Carolyn Paden **Examiner:** 

		CALIFORNIA DATE OF CALADA	TIL AT EVT OF 40
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> "Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450"

dnuary, 26, 2006

GERARD J. MCGOWAN , JR

Reg. No. 29,412

Attorney for Applicant(s)

UNITED STATES DEPT. OF COMMERCE Patent and Trademark Office

COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Case F7571(V)

Applicant:

Fabian, et al.

Serial No .:

10/005,702

Filed:

December 5, 2001

For:

**Pourable Frying Composition** 

January 26, 2006 Date of Signature

Group:

1761

Examiner: Carolyn Paden

Englewood Cliffs, New Jersey 07632

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application. [XX ] No additional fee is required.

The fee has been calculated as shown below.

**CLAIMS AS AMENDED** 

	(2) * Claims Remaining After Amendment		(4)** Highest No. Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims		Minus			\$ 50.00	
Independent Claims		Minus			\$ 200.00	
Multiple Claims					\$ 360.00	
TOTAL ADDITIONAL FEE	FOR THIS AMENDMEN	<del></del>			\$	

<sup>&</sup>quot;If the entry in Column (2) is less than the entry in Column (4), write "0" in Column (5).

\_ to Deposit Acct. #12-1155. Triplicate copies of this letter are enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees, which may be required to our deposit account No. 12-1155, including all required fees under

[X] 37 C.F.R. § 1.16;

[X] 37 C.F.R. § 1.17; [X] 37 C.F.R. § 1.18.

Triplicate copies of this letter are enclosed.

/gjm

(201) 894-2297

Gérard J. McGowan, Jr.

Attorney of Record Reg. #29,412

<sup>\*\*</sup>If the "Highest No. Previously Paid For" is less than "20," write "20" in this space.